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**** CONTINUING DATA *******
 This application is a CIP of 09/035,600 03/05/1998 PAT 6,353,614

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 12	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS
 56436

TITLE
 METHOD FOR ADDRESS MAPPING IN A NETWORK ACCESS SYSTEM AND A NETWORK ACCESS
 DEVICE FOR USE THEREWITH

FILING FEE RECEIVED 1654	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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